

UNITED STATES DISTRICT COURT  
DISTRICT OF OREGON

KERRY D. AUSTIN, on behalf of himself and  
all others similarly situated

Plaintiff(s),

v.

UNION BOND & TRUST CO., et al.

Defendant(s).

Civil Case No. 3:14-cv-00706-ST

APPLICATION FOR SPECIAL  
ADMISSION – *PRO HAC VICE*

Attorney KYLE G. BATES requests special admission *pro hac vice* in the above-captioned case.

**Certification of Attorney Seeking *Pro Hac Vice* Admission:** I have read and understand the requirements of LR 83-3, and certify that the following information is correct:

(1) PERSONAL DATA:

Name: <u>Bates</u>	<u>Kyle</u>	<u>G.</u>
(Last Name)	(First Name)	(MI) (Suffix)
Firm or Business Affiliation: <u>Schneider Wallace Cottrell Konecky Wotkyns LLP</u>		
Mailing Address: <u>180 Montgomery Street, Suite 2000</u>		
City: <u>San Francisco</u>	State: <u>California</u>	Zip: <u>94104</u>
Phone Number: <u>(415) 421-7100</u>	Fax Number: <u>(415) 421-7105</u>	
Business E-mail Address: <u>kbates@schneiderwallace.com</u>		

**(2) BAR ADMISSIONS INFORMATION:**

(a) State bar admission(s), date(s) of admission, and bar ID number(s):  
[California, 12/3/14, Bar no. 299114](#)

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(b) Other federal court admission(s), date(s) of admission, and bar ID number(s):

[USDC Northern District of California, 12/3/14](#)

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[USDC Southern District of Iowa, 12/24/14](#)

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**(3) CERTIFICATION OF DISCIPLINARY ACTIONS:**

(a)  I am not now, nor have I ever been subject to any disciplinary action by any state or federal bar association; or

(b)  I am now or have been subject to disciplinary action from a state or federal bar association. (See attached letter of explanation.)

**(4) CERTIFICATION OF PROFESSIONAL LIABILITY INSURANCE:**

I have professional liability insurance, or financial responsibility equivalent to liability insurance, that will apply and remain in force for the duration of the case, including any appeal proceedings.

**(5) REPRESENTATION STATEMENT:**

I am representing the following party(s) in this case:

[KERRY D. AUSTIN, on behalf of himself and all others similarly situated](#)

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**(6) CM/ECF REGISTRATION:**

Concurrent with approval of this *pro hac vice* application, I acknowledge that I will become a registered user of the Court's Case Management/Electronic Case File system. (See the Court's website at [ord.uscourts.gov](http://ord.uscourts.gov)), and I consent to electronic service pursuant to Fed. R. Civ. P 5(b)(2)(E) and the Local Rules of the District of Oregon.

**DATED** this 9th day of April, 2015

/s/ Kyle G. Bates

*(Signature of Pro Hac Counsel)*

Kyle G. Bates

*(Typed Name)*

**CERTIFICATION OF ASSOCIATED LOCAL COUNSEL:**

I certify that I am a member in good standing of the bar of this Court, that I have read and understand the requirements of LR 83-3, and that I will serve as designated local counsel in this particular case.

**DATED** this 9th day of April, 2015

s/Timothy S. DeJong

*(Signature of Local Counsel)*

Name: DeJong S.  
(Last Name) (First Name) (MI) (Suffix)

Oregon State Bar Number: 940662

Firm or Business Affiliation: Stoll Stoll Berne Lokting & Shlachter P.C.

Mailing Address: 209 S.W. Oak Street, Suite 500

City: Portland State: Oregon Zip: 97204

Phone Number: (503) 227-1600 Business E-mail Address: tdejong@stollberne.com

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**COURT ACTION**

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Application approved subject to payment of fees.  
 Application denied.

**DATED** this \_\_\_\_\_ day of \_\_\_\_\_,

Judge